

Review of Agreement

The Departments shall, at least annually, review this agreement for the purpose of making necessary adaptations.

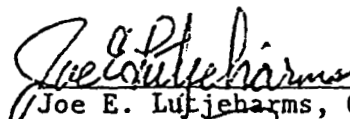
Effective Date of Agreement

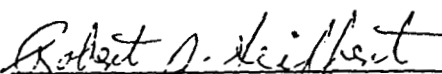
This agreement shall become effective on the 1st day of July, 1984, and shall continue in effect, subject to revisions or modifications resulting from annual review.

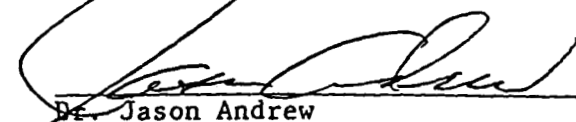
This agreement may be terminated by either of the two parties giving formal written notice to the other party 30 days before termination date.

Signatures:

  
Gina C. Dunning, Director  
Department of Social Services

  
Joe E. Lufjeharms, Commissioner  
Department of Education

  
Robert J. Seiffert, Administrator  
Medical Services Division

  
Dr. Jason Andrew  
Assistant Commissioner/Director  
Division of Rehabilitation Services

w18/i1-9

APPROVED AS TO LEGAL FORM

  
OFFICE OF THE GENERAL COUNSEL

State Plan TN#MS84-15 Effective Date 7/1/84  
Supersedes TN#MS 79-14 Approval Date 10/11/84

STATE OF NEBRASKA  
NEBRASKA STATE DEPARTMENT OF PUBLIC WELFARE  
MEDICAL SERVICES DIVISION  
AGREEMENT BETWEEN  
TITLE XIX PROGRAM (MEDICAID)  
AND  
~~EARLY AND PERIODIC SCREENING, DIAGNOSIS AND TREATMENT (EPSDT)~~  
AND  
NEBRASKA SERVICES FOR ~~CRIPPLED~~ CHILDREN  
TITLE V PROGRAM  
SUPPLEMENTAL SECURITY INCOME-DISABLED CHILDREN'S PROGRAM

Intent of Agreement

The mutual objectives of the Title XIX Program and Early and Periodic Screening, Diagnosis and Treatment (EPSDT) and Services for Crippled Children (Title V and Supplemental Security Income-Disabled Children's Program-SSI-DCP) are to make medical care available to all those individuals in the State of Nebraska who are found to be eligible for the respective programs and to avoid duplication of such services. Priority is given to early and periodic screening and treatment of medical problems in children. Federal emphasis is given to the Title XIX Program as the first resource of payment to offer quality, coordinated medical care and medical social services at the lowest possible cost to State and County government. The intent of this agreement is to assure continuing and close cooperation between these programs and to outline the basic scope of services to be provided by each. These services are provided through local contracted providers.

Responsibilities

1. Medical Services through Title XIX is charged with administering Nebraska's Medicaid Program - to assume health care to low income persons - including EPSDT and the maintenance of records.
2. Services for Crippled Children (SCC) is responsible for the coordination of quality, specialized medical care and medical social services to children with handicapping conditions. SCC is responsible for administering the Title V Program and the SSI-Disabled Children's Program which provides coordination of all services for all eligible children and includes medical services.

Services

Medical care and services through Title XIX are provided to maintain good mental and physical health, prevent disease and disability, mitigate disease, and rehabilitate the individual.

Necessary and appropriate medical care may be provided under the Medical Assistance program and includes the following:

audiology or speech services  
inpatient hospital care  
outpatient hospital care (includes day care)  
laboratory and x-ray services

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skilled facility services  
intermediate facility services  
home health care services  
family planning  
early and periodic screening  
transfusions  
clinic services  
inhalation therapy  
durable medical equipment  
supplies  
ambulance services when medically necessary  
care in institutions for mental disease if patients are under 22

Diagnostic, preventative, remedial and rehabilitative services are provided within licensure of practitioners licensed to practice medicine, surgery, dentistry, osteopathy, chiropractic, podiatry, optometry, nursing, physical therapy and pharmacy.

The purpose of Early Periodic Screening, Diagnosis and Treatment is to provide early detection of illness or defects through a screening process and to provide for follow-up of the diagnosis resulting from the screening, to encourage and insure that treatment within the existing medical assistance scope is available and received by those eligible and in need of treatment. The following items are included in the screening process:

1. Health and developmental history.
2. Unclothed physical examination.
3. Immunizations which are appropriate for age and health history.
4. Assessment of nutritional status.
5. Vision testing.
6. Hearing testing.
7. Laboratory procedures appropriate for age and population groups.
8. For children aged 3 or over, dental services furnished by direct referral to a dentist for diagnosis and treatment if a child has not had a dental exam under Medicaid 12 months prior to the screening request. Children under age three will be screened by the medical doctor.

This service is for prevention and early detection as opposed to other services directed primarily to payment of services for existing health conditions. Services are delivered according to a periodicity schedule established by the state.

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SCC-Title V offers the following medical services:

1. Early identification of children in need of health care and services;
2. Diagnostic and/or consultative medical service for any child by SCC-Title V specialized contractual providers;
3. Active treatment services for eligible children provided through SCC-Title V contractual providers. Such treatment includes specialized physician services and may include hospitalization, surgery, appliances, paramedical services, some medications and after care as available and indicated and as included in program coverage;
4. Referral services for care not within the limitations of the SCC program, whenever possible; and
5. Development, strengthening and improvement of standards and services.

Program coverage includes:

orthopedic conditions	eye conditions amenable to surgery
scoliosis	mid-line neurological defects
rheumatoid arthritis	hearing loss
amputations	neoplasms
cerebral palsy	major medical
oral plastic handicaps	asthma
heart disease	
cystic fibrosis	

Services which can be provided by the SSI-Disabled Children's Program are:

1. Diagnostic services of a physician, team of physician extenders, multi-disciplinary team as appropriate.
2. Treatment services of a physician.
3. Inpatient and outpatient hospital services.
4. Medical devices and related services.
5. Social services and medical social work.
6. Physical and occupational therapy.
7. Hearing services.
8. Vision services.
9. Counseling services including rehabilitative, developmental, social, occupational and educational counseling.

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10. Child development services.
11. Mental health services.
12. Pharmaceutical services, including provision of drugs.
13. Preventive services of a physician.
14. Dental services.
15. Speech services.
16. Nursing services.
17. Home health services.
18. Transportation services needed to carry out the individual service plan.
19. Nutrition services as needed to correct a medical condition or facilitate carrying out of the individual service plan.
20. Emergency medical services.
21. Reading and interpreter services for the deaf and the blind.
22. Other facilitating services which are needed to fulfill the individual service plan and provide the above services.

The SSI Disabled Children's Program provides services for children under seven years of age and for those who have never attended public school. The above services may be provided through SSI funding when said services are not available through other resources.

Applications for SCC-Title V and Title XIX are taken on the county level. The overall administration of both programs is carried on by the State Central Office. Services are provided by approved providers if clients are eligible and prior authorization is given when necessary.

In the situation where clients are mutually eligible for EPSDT and SCC-Title V services, Title XIX (Medicaid) will pay for those services, with SCC-Title V picking up the county share if it is a service for which SCC-Title V would ordinarily pay. The SSI-Disabled Children's Program will pay for services which are ordinarily covered by the other programs but for which the client is ineligible. SCC-Title V will cover payment for appropriate services for clients who are not Title XIX eligible.

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Services to parents and children to facilitate attendance at SCC-Title V Clinics and/or attendance at SCC-Title V scheduled appointments and hospitalization remain the responsibility of the County Divisions of Public Welfare. These services may include the following:

1. The arrangement of financial and/or transportation services to allow travel and room and board expenses.
2. Consultation with parents, children, school personnel, and others in a community to educate these persons of the need for scheduled specialized medical care.

Case services are the responsibility of the County Divisions of Public Welfare under the supervision, direction and/or request of State SCC-Title V employees and may include the following:

1. Counseling services to parents and/or children and others to demonstrate the need for specialized medical care.
2. Advocacy services to parents, schools and others to demonstrate the need for special consideration and/or treatment as a result of a medical condition and its psychological implications.

As a service to Nebraska's children, appropriate elements of SCC-Title V Oral Plastic Team will provide consultation on request to Title XIX for orthodontic evaluations:

1. These requests will be initiated by the Title XIX Dental Consultants;  
or
2. Be initiated as a result of denial by Title XIX for orthodontic care.

County workers are responsible for follow-up of recommendations made as a result of EPSDT involvement.

Responsibility for the resolution of problems will be as follows:

EPSDT - the EPSDT coordinator.

Title V - the SCC assistant administrator for Title V.

SSI-Disabled Children's Program - the SCC assistant administrator for the SSI-Disabled Children's Program.

Title XIX - the appropriate unit manager for Title XIX.

These persons will resolve problems between the programs and will establish the necessary policies to assure coordination and further specific goals as specified under the section "Measurable Objectives". Meetings for these purposes will be held as needed but must be held on a semi-annual basis. Problems that cannot be resolved will be referred to the Assistant Chief for the Medical Services Division and the Administrator of SCC. All new policies and all resolution of problems must be approved by the Medical Director of SCC and the Chief of the Medical Services Division.

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Individuals eligible for both EPSDT and SCC-Title V services will be informed of such eligibility. Check stuffers on the subject will be received periodically by ADC clients, and EPSDT material will be distributed at SCC clinics. The State EPSDT coordinator will be alert for potential referral situations to SCC-Title V and SSI-Disabled Children's Programs. The EPSDT worker at the county level will similarly discuss SCC-Title V and SSI-DCP programs with EPSDT eligibles. The SSI-DCP program will reinforce the SCC-Title V and EPSDT programs as opportunities permit, providing transportation to clinics, equipment, etc.

#### Reciprocal Referrals

The Services for Crippled Children Program will refer to County Divisions of Public Welfare for determination of Title XIX eligibility, those clients in need of services not covered under the SCC-Title V program.

Employees of the County Divisions of Public Welfare will take major responsibility in screening their ADC Title XIX case loads and new certifications to determine possible eligibility for a Services for Crippled Children's Title V Program.

1. Parental permission for referral will be obtained prior to referral to SCC-Title V for a specific diagnosis and/or treatment.
2. Proper forms and procedures as determined by SCC will be utilized.

Employees of the County Divisions of Public Welfare will make referrals to SCC-Title V as a result of the screening reports received through the EPSDT Program as requested by the EPSDT coordinator.

1. Parental permission will be obtained prior to the referral and the parent's decision will be honored.
2. Proper forms and procedures as determined by SCC will be utilized.

The EPSDT Coordinator will screen all EPSDT reports that show a need for further diagnostic evaluations and/or treatment for possible SCC-Title V or SSI-Disabled Children's Program.

A copy of the MC-5, EPSDT Screening and Payment Form will be made available to SCC-Title V by the EPSDT coordinator on children potentially eligible for further diagnostic and/or treatment care under one of the several SCC-Title V programs.

The EPSDT coordinator will inform the County Welfare worker, who is responsible for the follow-up on EPSDT recommendations, of the need for SCC-Title V referral. The county worker will inform the recipient of the availability of SCC services. In addition, a designated SCC staff member, based on referral by the EPSDT coordinator, shall notify the potentially eligible recipient by letter of the availability of SCC services and the procedure for application.

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The SSI Disabled Children's Program will refer clients to the County Divisions to determine eligibility for Title XIX and the State Supplemental Program. The Disabled Children's Program will encourage eligible families to participate in EPSDT. County Welfare Divisions will take the responsibility of referring families of children potentially eligible for the SSI-Disabled Children's Program to their local Social Security office to make an application.

Payment

Payment benefits from other hospital or health insurance or other third parties will be utilized before drawing on Medicaid funds.

Payment of all medical treatment care received by children referred by EPSDT to the SCC Title V Program will be made through Title XIX fundings. Diagnostic evaluations will be provided by SCC through the Title V Program if provided at SCC clinics. Any in or outpatient diagnostic charges for evaluations authorized by SCC-Title V which are identifiable for a particular child will be paid by Title XIX.

Payment of medical care for all children who are certified for both SCC-Title V and Title XIX programs will be made from Title XIX funds.

1. SCC-Title V will reimburse the County Division of Public Welfare their cost of Title XIX payments for all certified SCC-Title V cases from State non-matching SCC-Title V funding.
2. SCC will be furnished a monthly computer printout showing SCC-Title V eligible children for which payments were made on the Title XIX county funding. This printout will include the following information: name of child, social security number, county of financial responsibility, county of residence, SCC program on which payment was made, amount of payments, provider, and type of service.

In order to safeguard the quality of SCC-Title V care and adhere to other Title V regulations, the following must apply:

1. All care for which SCC-Title V funding is used must be coordinated through Nebraska Services for Crippled Children and be provided by Services for Crippled Children contractual providers.
2. All care for which SCC-Title V funding is used must be authorized by Services for Crippled Children prior to receipt of care.
3. All claim vouchers submitted for payment on which SCC-Title V funding is to be used must be audited prior to payment for appropriateness of the care received. Any items not appropriate for SCC-Title V funding will be paid using Title XIX funds only.

Payment of services by the SSI-Disabled Children's Program will be made only if there is no other funding source, including SCC-Title XIX and Title V.

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For mutually eligible clients, payment is made at XIX level, with SCC-Title V paying county share at the Title XIX level.

Medical payments are made for medically necessary services (including EPSDT) furnished to eligible clients by a provider of their choice who has agreed to participate in the program by signing a provider agreement.

Providers will bill for their services. All payments to providers are issued by the Division of Payments and Data Services. Bills for SCC-Title V services are audited by an SCC payment specialist prior to forwarding to Payment and Data Services. There is no formal appeal process for individual providers in either program.

Medicaid income earned by SCC-Title V grantee will be used to help maintain levels of service.

#### Exchange of Reports

When a child is eligible for the Title XIX Program and an EPSDT screening is completed, the EPSDT coordinator will forward a copy of the MC-5 Early Periodic Screening and Payment Form to the Administrator of SCC to be referred to either SCC-Title V or the SSI-Disabled Children's Program or both as appropriate.

If treatment is provided under either of these programs, appropriate treatment reports, clinic reports, hospital discharge summaries, CC-160 - Notification of Case Action, etc., will be provided the administrator of SCC, who will forward copies as necessary to the EPSDT coordinator for payment and statistical computation.

In general, the data generated will be used for reimbursement, record keeping, and research.

Distribution will include quarterly reports to the Department of HHS regarding the EPSDT program.

The Disabled Children's Program will share a copy of the report on which the medical determination was made for SSI benefits if the request is made by the County in which the family applies for Title XIX. The information will be shared if the family signs a release of information and it is to be used to determine eligibility for Title XIX.

#### Plan Coordination

1. Title XIX and SCC-Title V representatives will meet at least semi-annually to review plans relating to Medicaid recipients.
2. Included will be all areas of cooperative effort and an exploration of further mutual activity benefiting Title XIX and Title V-SCC clients.

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Policy Evaluation

1. Title XIX and Title V-SCC designated liaison staff will meet at least semi-annually to evaluate the effectiveness of policies affecting the delivery of services through SCC-Title V to Medicaid eligibles. The written policies will be received by the group and necessary changes, if any, identified and discussed for potential improvement of program functions.

The policies will pertain to the scope of services as outlined in the Title XIX and SCC-Title V State Plans, and the respective reimbursement rates for services covered under the agreement.

Review of Agreement

This agreement will be reviewed and modified by the Assistant Chief of the Medical Services Division and the Administrator of Services for Crippled Children on an annual basis. All modifications are subject to the review and approval of the Medical Director of SCC and the Chief of the Division of Medical Services. The information gathered by the staff involved in the joint evaluation process will be considered to determine if modifications are needed in policy, budgets, laws, etc., to enhance cooperation between the agencies involved in this agreement.

Liaison Staff

Continuing and close cooperation will be ensured between Medical Services and Services for Crippled Children by the designation of the liaison staff for each program. The designated liaison personnel will handle matters other than policy changes and procedures. However, any policy changes and changes of procedure must be reviewed and approved by the Medical Director of SCC and the Chief of the Medical Services Division.

Liaison personnel will be:

EPSDT - the EPSDT coordinator

Title V - the SCC assistant administrator for Title V

SSI - Disabled Children's Program - the SCC assistant administrator for the SSI-Disabled Children's Program

Title XIX - unit managers

Liaison personnel will meet on a quarterly basis. They are responsible for coordinating the several programs and furthering the mutual objectives contained in this agreement.

Funding Maintained

The level of public non-federal funding available for Title XIX and EPSDT and Services for Crippled Children during the fiscal year ending June 30, 1976 will be maintained during subsequent fiscal years.

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